

24 January 2003

ALL:

This is a summation of the JCAHO survey process for a civilian hospital that recently completed their JCAHO survey for 2003. I highly suspect that the same approach will be used during most surveys for 2003. Hopefully these tips will assist in your preparation for both hospital and ambulatory future surveys. Chuck Deal

Greetings...We have just finished our JCAHO survey and I am sending along a brief summary of the survey. We scored well, a 96 with one type 1 -

"Verbal/telephone orders not being authenticated in a timely manner".

Surveyors: Nurse and Team Leader: Bonnie Borchman, R.N.

Administrator: Allen Humble

Physician: Russell La Beau, M.D.

Observer: Terry McMahon ? Lab Technology

The following information was requested prior to the survey and was to be available at the Opening Conference:

Copy of Public Notice in Paper and Postings

All Clinical Contracts

Completed Medical Record Statistics (delinquency) form

Medical Record Review Summary Sheet with action plans, must be signed and findings should be expressed in numerator/denominator format

List of all Hospital Personnel by department, job title and date of hire

List of all Medical Staff Members by Category and List of all Allied

Health Professionals by Category

Copy of current SOC and SOC from your survey three years ago

List of five top DRG's

Number of Licensed Beds versus operational and staffed beds and Average Daily Census

Any requests for a Public Information Interview (should notify JCAHO account representative and the surveyor prior to survey)

Off Shift Survey Visit

This was at 9:00 PM on day one. The Physician Surveyor rounded the entire hospital for one and a half-hours with the Evening Supervisor and interviewed staff.

Opening Conference/Daily Briefing

The surveyors introduced themselves, discussed purpose of daily briefings, and asked if there were any requests for interviews. Stated that they were here not only to survey but also to be educative and consultative. They stated that if we disagreed with any findings at any time they would be willing to discuss the issues further with any staff and would also look at any pertinent documentation that could clarify the issue at hand. They specifically asked to see our FMEA from this year and last year.

Documentation Review

Lasted two hours, they asked to see (asked them to come in 15 minutes prior to the end of the Documentation Review Session) the Director of Medical Records, Human Resources and Medical Staff to give them lists of charts/employee files they would review. They pulled 12 closed medical records according to DRG and discharge date, 20 Human Resources Files (10 clinical and 10 non-clinical) and 8 Medical Staff Files.

Performance Measurement and Improvement Interview/Team Presentation/ORYX Data

(This interview was 1 hour and 15 minutes). We received a copy of our ORYX Control Charts about two weeks prior to survey. They asked us to present one PI Initiative. Our presentation lasted about 50 minutes and we had four presenters. Our Medical Staff PI representative presented a short overview of our PI Program, Our chair of Medicine presented our ORYX data and transition to Core Measures (they really liked that a physician presented this information), our EOC Chair did a short presentation on Emergency Management (We were very proud of this) and our Pharmacy Director presented a FMEA on MAR (Medication Administration Record) Double-checks. We also had our MAR FMEA Team present for questions. Questions asked:

- Who has oversight for PI?
- How is patient safety integrated into your PI program?
- How do you communicate information to the staff regarding PI?
- How do you allocate resources for PI initiatives and set priorities?
- How do you measure the effectiveness of your PI teams?
- How are you looking at core measures vs. ORYX data?
- What have you improved as a result of your ORYX data?
- Any near misses/sentinel events in the areas you collected ORYX data on?
- How is medical staff involved in ORYX and Core Measures?
- How is the information on ORYX/Core Measures communicated to administration, physicians and staff?
- Do you review cases retro- or proactive?
- What are your thoughts on the value of Core Measures vs. ORYX?
- FMEA?
- Did you see any improvement from data collected?
- How did you communicate the FMEA and results of data to administration, physicians and staff?
- For your RCA, how are your action plans working?
- How did you communicate to staff the three areas of noncompliance with your policy and how did they respond?
- How did staff react to the changes you made in the policy? Was staff included in making the policy changes?
- Tell us about an improvement you made related to an adverse drug event
- Emergency Management: If you needed to shut down your hospital, what would you do? Tell us more about the HEICS structure (Hospital Emergency Incident Command Structure). They really liked all of the changes we made and felt we were ahead of most hospitals.

Leadership and Chief Executive Officer/Strategic Planning and Resource Allocation Interview

We had 7 Board of Trustees attend this session in addition to our President, Senior Management and Physician Leadership and they were very impressed by this. Surveyors asked:

- Tell us how an average employee is exposed to Patient Safety at your institution.
- What is different for your employees/physicians today with regards to Patient Safety
- Tell us how leadership is involved in patient safety including the Board of Trustees
- Tell us about sentinel events and RCA's at the Medical Center
- Have you been involved in a FMEA or RCA? Tell us about what you have learned?
- Do you know about the National Patient Safety Goals, what are they and what have you done to implement them?
- How do you respond to Sentinel Event Alerts and have you made any improvements?
- What does the Board know about the Competency of the staff?
- How did you choose your staffing indicators?
- What does your analysis of staffing indicators tell you?

- What is your biggest staffing challenges?
- Do you have enough staff to take care of your patients?
- What are you doing about hard to fill positions? Recruitment efforts?
- Retention efforts?
- How do you recruit/attract new Board Members?
- How do you orient new Board Members?
- What types of ongoing education do you provide for your Board members? Leadership?
- Staff?
- How does the Board get educated on Patient Safety, PI, and Staffing effectiveness?
- How is the Board involved in Customer Satisfaction? How do you assess Customer Satisfaction?
- Tell us about the information technology, what you have done and how it has improved communication.
- What is your biggest accomplishment this year?
- What is your biggest challenge?
- How do you assess the needs of the community and how do you know you provide the services that are needed?
- Tell us about a new service since the last survey, why you started it and how do you know it is effective

Patient Safety and Medication Management Interview

This interview was a bit awkward; they asked us to have only staff present, representatives from nursing, anesthesia, lab, pharmacy, dietary, respiratory, social services and Pharmacy & Therapeutics Committee (we had a physician representative). However, we did have our director of Pharmacy present. Some of the questions were not staff focused; the surveyors agreed that this interview should to be better focused.

- Tell us what the six National Safety Goals are.
- How have you implemented the eleven recommendations into your practice?
- Tell us about what patient identifiers you use and what identifier should not be used.
- How do you illicit feedback from patients regarding patient safety?
- What improvements have you made in the area of patient safety that is a direct result of feedback from patients?
- Would you tell a patient if they asked what your infection rate is? Do you know what your hospital infection rate is? Do you have a policy on disclosing information to patients?
- What is your medication process? What are the areas you collect data on in the medication use process? What areas have you identified for improvement?
- Tell us about your ADE/ADR reporting and the difference between the two.
- How do you engage patients in medication safety?
- How do you educate patients regarding medication safety?
- How many strengths of Demerol do you keep?
- How do you deal with narcotic wastage?
- How would you know if someone is diverting drugs?
- Who checks PYXIS against MD order?
- How does the hospital decide what drugs are added to the formulary. What is the process?
- How do you educate staff on new drugs?
- What is the drug utilization process? How do you evaluate the effectiveness of a drug?
- Do you have a 24-hour pharmacy?
- What do you do if a physician wants to use a drug not on your formulary?
- Tell us about communication between caregivers, what methods do you use?
- Tell us about a PI initiative you are involved in and what improvements you have seen as a result.
- You are part of a system of hospitals, tell us how you share clinical information and improvements you have made as a result of your collaborations.

Unit/Department Visit

During most interviews (interdisciplinary team), the surveyors were only able to review one chart, they sat with the staff nurse and reviewed the chart for consent, risk and benefits, care plan, completeness and content of forms, readability and communication between caregivers (focus on interdisciplinary approach). They checked every crash cart and refrigerator log. Checked call light response. Surveyors stated that most likely department interviews will not be held beginning in 2004. The tracer methodology will be used and caregivers will be interviewed as surveyors review charts.

- Give me an overview of the scope of services you provide in this department.
- What volume of patients do you treat?
- Tell me about staffing, how are staffing levels determined, are you adequately staffed?
- Asked about qualifications and competencies of staff.
- Asked about oxygen shut off valves, where are they and who can turn them off?
- Asked about the National Patient Safety Goals and how they are implemented on the unit.
- Asked about PI initiatives and what improvements have been made (liked the fact that they were posted on bulletin boards). What are you most proud of? What makes this a great place to work?
- How are patients involved in safety?
- Asked about assessment and reassessment, care planning and goal setting.
- Do you have clinical pathways, if so, how are they used?
- Do you use clinical practice guidelines, standing orders and if so how are they developed and approved?
- Coverage of PT and OT and Dietary and what are the timeframes for screening and assessment?
- Looked at patients in restraints and if we follow our policy.
- How is pastoral care involved in patient care?
- Do you have an ethics committee? What is the process for getting an ethics consultation?

Infection Control

- What are you doing to prevent infections?
- How do you know it works?
- What are your IC priorities?
- Rationale for Surveillance
- What is your biggest problem and what are you doing about it?
- How do you handle exposures?
- How do you monitor knowledge and IC practices throughout the medical center?
- How are you responding to the CDC guidelines for hand washing?
- How do you disseminate information regarding IC practices throughout the medical center?
- Does each department know about infection rates of the patients they treat?

Medical Staff Performance Improvement Interview

- How is the Medical Staff involved in strategic planning? The budgeting process?
- What do you think about JCAHO accreditation?
- How are you involved in PI and Safety? National Patient Safety Goals? FMEA? RCA?
- Tell me about the peer review process
- Physician spend most of the time educating physicians on the Federation of American State Boards and their pilot projects

EOC Interview/Building Tour

Interview began with 2 hours of open discussion with EOC team members (questions below):

- Tell me what you've done about Emergency Management since 9-11.
- What have you improved upon in the areas of Safety/Security since last survey?

- How does your staff and physicians view safety/security?
- What are the differences between Statement of Conditions and IDPH survey findings?
- Life Safety: are you better prepared than 3 years ago? Are the staff and MDs better educated & aware of life safety? Examples?
- Clinical Engineering: what's better than 3 years ago?
- General Safety: what's better than 3 years ago?
- How do you handle restraining orders, estranged relationships, and domestic violence issues?
- What is your weapons policy? What is your policy about minor weapons, such as pepper spray, etc?
- Utilities: what's better than 3 years ago?
- Hazardous Materials: what's better than 3 years ago?

Next was a 2-hour building tour, followed by 2 hours of document review.

- He selected 4 pieces of equipment during tour, and asked to see the PM documentation on the equipment.
- What is your policy when the vendor recommendations are different than your own preferred procedures for a PM?
- How do you know that your key equipment is OK on back-up power? When you test the generator, do you specifically test the functions of all equipment on back-up power? (example: Cardiac Cath Labs)
- Looked at fire drill data for compliance.
- Looked at fire suppression and fire pump system testing.

Information Management Interview

- Tell us what you have focused on in the past year in regards to information management.
- What have your IMO staff improved?
- What measures do you take to ensure security of your information and confidentiality?
- How do you assess your information needs? Do you get feedback from the Board, Administration and Staff? What input has your staff given you?
- Tell me about your transcription services?
- Tell us about how you assess software needs and how you make decisions regarding software and hardware?
- Do you have Internet access? Does all of your staff have access? What about training of staff?
- What information resources do you provide to staff?
- They reviewed 12 closed records. They said starting in 2004, closed records will no longer be reviewed.

Human Resources Interview

- What is your process for screening new employment applicants?
- What is your orientation process?
- How is safety integrated into the orientation process?
- How do you know your orientation process works?
- How are continuing education needs of staff assessed?
- What is your process/policy for completing performance evaluations?
- Are your performance evaluations done on time?
- How do you develop job descriptions?
- How do you determine if a staff member is competent or not?
- How do you know if licenses are up to date and valid?
- What are your staffing effectiveness indicators? How did you choose them? What have you learned thus far? Focus should be more practical, not on correlation (hard to do) but relationship.
- They reviewed 20 personnel files.